Approved, SCAO JIS CODE: PAR

STATE OF MICHIGAN PROBATE COURT COUNTY

PROOF OF RESTRICTED ACCOUNT AND **ANNUAL VERIFICATION OF FUNDS ON DEPOSIT**

FILE N	O
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CIRCUIT COURT - FAMILY DIVISION	(CONSERVATORSHIP OF MINOR)	
In the matter of		, minor
USE NOTE: This form must be complete ordered by the court, and annually there	ed and filed with the court within 14 days of the coreafter.	nservator's qualification, or as otherwise
Name of financial institution/insurance company/l	brokerage firm	
Address		Telephone no.
Name of authorized representative	Title	
I certity that the estate funds of the mind	or are currently on deposit with us under a restric	cted account as follows:
Type of account	Account number	Balance
Account caption (include name of conservator)		
2. Records have been marked to prohib3. We are liable for funds released or wi	ecting this information. Not be released or withdrawn except by written or Not withdrawal except by written order of this cour ithdrawn without written order of this court. e, invested in those investments permitted by Mi	t.
Date	Signature of authorized repr	esentative
	Do not write below this line - For court use only	
	,	